

Application Number

Applicant(s)

* May be used for additional claims or amendments

| CLAIMS | AS FILED 3/31/06 | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | |
|------------------|---------------------|--------|--------------------------|--------|---------------------------|--------|
| | Indep. | Depend | Indep | Depend | Indep | Depend |
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| 16 | 1 | | | | | |
| 17 | | 1 | | | | |
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| 19 | | 2 | | | | |
| 20 | | 0 | | | | |
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| Total Indep. | 2 | | | | | |
| Total Depend. | 10 | | | | | |
| Total Claims | 12 | | | | | |

| * May be used for additional claims or amendments | | | | | | |
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| | Indep | Depend | Indep | Depend | Indep | Depend |
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| Total Indep. | | | | | | |
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